



HEALTH INSURANCE PLANS SEEKING EXCHANGE CERTIFICATION FOR 2015: DEDUCTIBLES AND OUT OF POCKET MAXIMUMS

SMALL GROUP MARKET COVERAGE (SMALL BUSINESS WITH 2-50 EMPLOYEES)

Below is a summary of some of the out-of-pocket costs included in plans seeking certification to be sold through the Federally-facilitated SHOP for the small group market in 2015. These charts focus on two types of cost sharing – **Deductibles¹** and **Out of Pocket Maximums²** – that will apply to covered Essential Health Benefits. Each chart provides the lowest, highest, and median available option available by **Plan Metal Level³** and by insurance company along with a summary of the lowest, highest, and median available option across all companies in each metal level.

Note: Some plans may separate the cost sharing that applies to medical benefits and prescription drug benefits. In these cases, we have combined the two separate amounts to reflect the combined deductible and/or out of pocket maximum. Additionally, plans may have multiple network tiers that include different cost sharing provisions. In these cases, we have included the preferred tier's deductible and out of pocket maximum.

SMALL GROUP MARKET: SELF-ONLY COVERAGE

Self-Only Coverage <i>Plans Seeking FF-SHOP Certification</i>	BlueChoice HealthPlan			BlueCross BlueShield of SC			Consumers' Choice Health Plan			All Companies Combined		
	Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median
BRONZE												
Out of Pocket Maximum	\$6,000	\$6,500	\$6,500	n/a	n/a	n/a	\$5,500	\$6,600	\$6,050	\$5,500	\$6,600	\$6,500
Deductible	\$3,500	\$6,300	\$5,250	n/a	n/a	n/a	\$4,250	\$5,500	\$4,875	\$3,500	\$6,300	\$5,250
SILVER												
Out of Pocket Maximum	\$3,500	\$6,350	\$6,000	\$6,350	\$6,350	\$6,350	\$3,000	\$6,600	\$5,800	\$3,000	\$6,600	\$6,175
Deductible	\$1,750	\$5,000	\$3,150	\$2,000	\$2,000	\$2,000	\$1,750	\$3,500	\$2,100	\$1,750	\$5,000	\$2,350
GOLD												
Out of Pocket Maximum	\$1,750	\$6,350	\$3,625	\$4,200	\$4,200	\$4,200	\$3,000	\$4,750	\$4,000	\$1,750	\$6,350	\$3,750
Deductible	\$1,000	\$2,100	\$1,250	\$1,200	\$1,200	\$1,200	\$500	\$3,500	\$1,325	\$500	\$3,500	\$1,250
PLATINUM												
Out of Pocket Maximum	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Deductible	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a



SMALL GROUP MARKET: FAMILY COVERAGE

Family Coverage <i>Plans Seeking FF-SHOP Certification</i>	BlueChoice HealthPlan			BlueCross BlueShield of SC			Consumers' Choice Health Plan			All Companies Combined		
	Minimum	Maximum	Median	Minimum	Maximum	Median	Minimum	Maximum	Median	Minimum	Maximum	Median
BRONZE												
Out of Pocket Maximum	\$10,500	\$11,700	\$11,350	n/a	n/a	n/a	\$11,000	\$13,200	\$12,100	\$10,500	\$13,200	\$11,350
Deductible	\$6,300	\$10,950	\$9,175	n/a	n/a	n/a	\$8,500	\$11,000	\$9,750	\$6,300	\$11,000	\$9,175
SILVER												
Out of Pocket Maximum	\$6,750	\$11,600	\$10,400	\$12,200	\$12,200	\$12,200	\$6,000	\$13,200	\$11,600	\$6,000	\$13,200	\$10,825
Deductible	\$3,150	\$8,850	\$4,650	\$3,800	\$3,800	\$3,800	\$3,500	\$7,000	\$4,200	\$3,150	\$8,850	\$4,425
GOLD												
Out of Pocket Maximum	\$3,750	\$13,200	\$7,300	\$8,250	\$8,250	\$8,250	\$6,000	\$9,500	\$8,000	\$3,750	\$13,200	\$7,650
Deductible	\$1,900	\$4,400	\$2,575	\$2,350	\$2,350	\$2,350	\$1,000	\$7,000	\$2,650	\$1,000	\$7,000	\$2,500
PLATINUM												
Out of Pocket Maximum	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Deductible	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a

¹The **Deductible** is the amount you owe for health care services your health insurance or plan covers before your health insurance or plan begins to pay. For example, if your deductible is \$2,000, your plan won't pay anything until you have met your \$2,000 deductible for covered health care services subject to the deductible. The deductible may not apply to all services.

² The **Out of Pocket Maximum** is the most you pay during a policy period (usually one year) before your health insurance or plan starts to pay 100% for covered essential health benefits. This limit must include the amount you pay toward your deductible along with other cost sharing provisions, such as coinsurance, copayments, or similar charges. This limit does NOT include premiums, balance billing amounts charged to you directly by non-network providers, out-of-network cost-sharing, or spending for non-essential health benefits. The federal government sets a limit on the out of pocket maximum each year. For 2015, the out of pocket maximum can be no more than \$6,600 for plan that only provides coverage for one individual ("self-only") and \$13,200 for a family plan.

³Plans are assigned one of five categories, commonly referred to as the **Plan Metal Level**, based on how you and the plan expect to share the costs for health care. Plans in each category pay different amounts of the total costs of an average person's care. The plan category you choose affects the total amount you'll likely spend for essential health benefits during the year.